



Informing healthcare volunteers about emergency medical response efforts in California

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Summer, 2018

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SUMMER, 2018









Manager's Message

Patrick Lynch, RN Manager, Response Personnel Unit



Patrick Lynch

Summer is here! Fun should be the objective, but fun in the sun brings its own risks.

Please take appropriate precautions regarding sun exposure, heat exposure, risks around water venues, creatures large and small in the great outdoors, and the travel to get to all the fun.

We hope you find the articles in this issue of the DHV Journal informative.

RECRUIT YOUR COLLEAGUES!!!

Disaster Healthcare Volunteers and Medical Reserve Corps volunteers are important

for our state. You know that. You have registered to provide your skills and services in times of need. We ask that you help increase our capabilities by recruiting your colleagues. We would be happy to see and help you recruit additional volunteers. Medical and health occupations are most helpful, and we would especially like to increase the number of DHV/MRC volunteers in the following occupations:

Radiology Occupations

- 1. Diagnostic Radiologic Technician
- 2. Health Physicist
- 3. Nuclear Medicine Technologist
- 4. Radiation Inspector/ Safety Officer
- 5. Radiation Technologist/Specialist
- 6. Radiation Therapist
- 7. Radiochemist

Behavioral and Mental Health Occupations

The Disaster Healthcare Volunteers Program would also benefit by having more behavioral / mental professionals registered. If you know of professionals in the following occupations, please encourage them to register and volunteer.

- 1. Associate Clinical Social Worker
- 2. Licensed Clinical Social Workers
- 3. Marriage Family Therapists
- 4. Psychiatrists
- 5. Psychiatric Nurses
- 6. Psychologists

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MRC Corner

Lauran Capps California State MRC Coordinator



Lauran Capps

In April 2018, as the CA State MRC Coordinator, I represented the EMS Authority at the National Association of County & City Health Officials (NACCHO) Preparedness Summit. This Summit is the longest-running national conference on public health preparedness. New tools and resources were shared, and there was a variety of opportunities for attendees to learn how to implement model practices that enhance

capabilities to prepare for, respond to, and recover from disasters and other emergencies. I attended many powerful, informative presentations, to name a few: Extraordinary Events of 2017-State, Local and Territorial Perspectives on Hurricane and Wildfire Response, Opioid Response in Maryland-Facilitating State level Coordination to Empower

Communities, Medical Reserve Corps Activations During the Catastrophic 2017 Hurricane Season, Valuable Resource Right in Your Backyard-How Health Care Coalitions are Collaborating with Local Volunteers to Enhance Emergency Response and Build Community Resilience, etc. This conference gave me the opportunity to network with local MRC Coordinators from other states, public health officials, volunteers, MRC State Coordinators.



California Medical Assistance Team (CAL-MAT) Full Scale Training Exercise

On Wednesday and Thursday, June 6th and 7th, the California EMS Authority sponsored and participated in a full-scale training exercise with two of the state's CAL-MAT Units. This medical field exercise was conducted in conjunction with the Urban Search and Rescue (USAR) exercise at Moffett Field in Mountain View, California. The event provided training sessions and a medical field treatment exercise for CAL-MAT personnel from San Francisco and Sacramento, Veterans Affairs staff from San Francisco, and Medical

personnel from San Francisco and Sacramento, Veterans Affairs staff from San Francisco, and Medical Reserve Corps (MRC) volunteers from Berkeley MRC and Santa Clara's MRC also known as Medical Volunteers in Disaster Response (MVDR).

Classes on Wednesday and on Thursday morning included Communications, START Triage, Death and Dying, Patient Unified Lookup System for Emergencies (PULSE), and a patient tracking system. The medical treatment exercise consisted of two evolutions, one Thursday afternoon and one late Thursday evening. Moulaged victims were extricated from the collapsed building rubble pile, packaged and transported to the Triage Area of the CAL-MAT base of operations where CAL-MAT, Veterans Affairs (VA), and MRC personnel received the patients and provided medical care.



From left: Kamile Greene, Lisa Vajgrt-Smith, Patrick Lynch, Diane St. Denis, and Ashley Zheng

The event was a well-received training opportunity and the Response Personnel Unit was very happy to be able to offer it to local Medical Reserve Corps volunteers.





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EMSA Hosts Medical Reserve Corps Coordinators Workshop



EMSA's Disaster Medical Services Division sponsored a training workshop for California's Medical Reserve Corps (MRC) Coordinators at DoubleTree Hilton Rancho Cordova, California on May 30 and 31.

The workshop featured presentations on topics ranging from MRC Mission Ready Packages, Certified Vaccinator pilot program, Patient Unified Lookup System for Emergencies (PULSE), Gear Bag, Disaster Service Worker Volunteer Program, Red Cross Shelter Operations, Small Team Leader Responsibilities, MPOD Drill, Leadership Skills, Lessons learned in Veterinary Response to 2017 October Wildfire, and Lessons learned in Response to 2017 December Wildfires.



It provided an opportunity for California's MRCs to strategize on the incorporation of MRCs into local emergency plans and to highlight daily best practices for sustainability, standardized training, and real situation experiences when responding to public health emergencies or disasters.



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Outstanding MRC Responder Award

Deborah Goldstein of the Sacramento MRC Unit (SMRC) is awarded this year's Outstanding MRC Responder by the U.S. Department of Health & Human Services.

Deborah Goldstein, an EMT with the Sacramento MRC (CA), has repeatedly proven herself to be an outstanding responder in her 12 years with the MRC. In 2017, Deborah participated in a



From Left: Patrick Lynch (EMSA), Jill Littlefield (HHS), Lynn Pesely (SMRC), Deborah Goldstein (SMRC), Craig Johnson (EMSA), Katherine Deffer (NACCHO).

number of emergency response efforts. With little notice, she staffed an American Red Cross shelter overnight in Sacramento County for people impacted by the Oroville Dam evacuation, flooding, and winter storms; she

was deployed to staff a medical shelter in Napa during the Fall in response to the Northern California wildfires; and through her Disaster Medical Assistance Team (DMAT), she deployed to assist with hurricane response efforts. In addition to active responses, Deborah played a key role in a full-scale airport exercise in 2017. The Sacramento MRC has a partnership with the Sacramento International Airport and has a medical trailer staged at the fire station for use by the fire department and MRC volunteers in the event of a plane crash, active shooter incident, or other emergency. Deborah played a key role in exercising these capabilities.

Source: https://mrc.hhs.gov/pageViewFldr/2018MRCAwardsWinners#Responder

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BE PREPARED FOR

Extreme heat often results

in the highest annual number of deaths among all

weather-related disasters.

Be Prepared For Extreme Heat

How to Stay Safe When Extreme Heat Threatens

Find places in your community where you can go to get cool.

Try to keep your home cool:

- Cover windows with drapes or shades.
- · Weather-strip doors and windows.
- Use window reflectors such as aluminum foil-covered cardboard to reflect heat back outside.
- Add insulation to keep the heat out.
- · Use attic fans to clear hot air.
- Install window air conditioners and insulate around them.

Learn to recognize the signs of heat illness.

Never leave a child, adult, or animal alone inside a vehicle on a warm day.

Find places with air conditioning. Libraries, shopping malls, and community centers can provide a cool place to take a break from the heat. If you're outside, find shade. Wear a hat wide enough to protect your face.

Wear loose, lightweight, light colored clothing.

In most of the U.S., extreme heat is a long period (2 to 3 dyng) of high heat are above 90 degrees.

IF YOU ARE UNDER AN EXTREME HEAT WARNING

Find air conditioning, if possible.

Avoid strenuous activities.

Watch for heat illness.

Watch for heat illness.

Drink plenty of fluids to stay hydrated. If you or someone you care for is on a special diet, ask a doctor what would be best.

Do not use electric fans when the temperature outside is more than 95 degrees. You could increase the risk of heat-related illness. Fans create air flow and a false sense of comfort, but do not reduce body temperature.

Avoid high-energy activities.

Check yourself, family members, and neighbors for signs of heat-related illness.

Source:

https://www.fema.gov/media-library-data/1522342356501-54bd8d92d0d0d07bca4c1250ebde2b21/ExtremeHeat_508.pdf

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Santa Cruz County Receives Mobile Medical Shelter

Santa Cruz County took possession of a six tent mobile medical shelter provided by the California Emergency Medical Services Authority (EMSA), and conducted a multi-partner training exercise. The exercise was a training scenario for setting up the mobile medical shelter which Santa Cruz County will operate with the aid of the county Medical Reserve Corps Unit along with other Santa Cruz County personnel.

The shelter has its own high powered generator so it can be operational in remote terrain or during a power outage. The set up time for the mobile medical shelter tent is about forty minutes. Santa Cruz did so with the help of their Medical



Video Source: http://www.kion546.com/news/first-mobile-hospital-in-santa-cruz/733478449

Reserve Corps members and county staff, just as they would for a real world event. EMSA staff from the Response Resources Unit under the management of Mr. Markell Pierce provided the training on set up and tear down of the tent.

Santa Cruz County Medical Reserve Corps is looking for additional volunteers, including Respiratory Therapists. Please contact Nancy Yellin, Santa Cruz County MRC Unit Coordinator.

If interested contact: 831-479-7226.

Santa Cruz will be one of six counties receiving mobile medical shelter units through MOUs with EMSA.



Video Source: http://www.kion546.com/news/first-mobile-hospital-in-santa-cruz/733478449



Santa Cruz County Medical Reserve Corps

http://www.santacruzhealth.org/HSAHome/HSADivisions/PublicHealth/SCCMRC.aspx

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Volcanoes in California

California is Volcano Country

The Kilauea eruption on Hawaii's Big Island is a reminder of the volcanic potential here in California. Three California volcanoes are considered very high threat by the US Geological Survey: Mount Shasta, Mount Lassen, and the Long Valley Volcanic Region near Mammoth.

Three others are considered high threat: the Clear Lake Volcanic Field which includes Mt. Konocti, the Medicine Lake Volcano in Siskiyou County, and the Salton Buttes in Southern California.

"Just like all the active faults in California, we know they're going to break," said Tim McCrink, Supervising Engineering Geologist at the California Geological Survey, as he compared volcanoes to earthquakes. "We know they're going to happen. We just don't know when."

A California volcanic eruption would be different than the creeping lava of Kilauea.

"What we would expect here would be more like Mount Saint Helens," McCrink said. "More of an explosive eruption. So that puts a lot of rock and dust and gasses in the air."

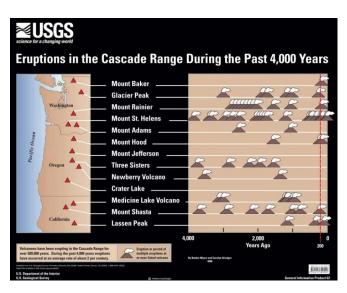


Photo: USGS CalVO

USGS caption: Volcanoes of very high to low threat are scattered throughout California, from the Oregon border (north) to Mexico (south). Other older volcanoes in California are of less concern. California's volcano watch list is subject to change as new data on past eruptive activity are collected, as volcanic unrest changes, and as populations in threatened areas grow or decline.

But there will likely be clear warning signs if a California Volcano is getting ready to go: earthquakes, gas emissions, deformation of land surfaces. People would likely have ample warning to evacuate, explained McCrink.

Mt. Lassen last erupted in 1915, and scientists believe Mt. Shasta last erupted in 1786. Washington's Mount Saint Helens erupted in 1980.



Prepared for a Volcano:

https://www.ready.gov/volcanoes

Sources: http://fox40.com/2018/05/08/california-is-volcano-country/

https://volcanoes.usgs.gov/observatories/calvo/

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DHV Events

January February March April May June July August September October November

Quarterly DHV System Drills:

On Wednesday, April 4, 2018, EMSA conducted the Statewide Quarterly Drill with DHV System Administrators.

Administrators were instructed to search the DHV system for specific responders within their organization and provide a detailed

April 4-5 2018 DHV Drill
Results

41 Counties/MRC's Participated
28 County Organizations
13 MRC Organizations

Drill duration 24 hours

Directed to
Send a message to specific volunteers giving them 20 hours to respond
Provide EMSA with a CSV Export of the volunteers that responded to the message



report of the statistics to EMSA. 41 organizations joined in the drill/exercise play during the 24 hours period. Among the identified organizations that participated, 92% achieved successful completion of the drill and reported their results to EMSA by the deadline.

April 4-5 2018 DHV Drill

The next drill is slated for July 11.

The Quarterly Drill was a statewide test of California's ESAR-VHP notification/communications system. It is an opportunity for System Administrators to test their basic knowledge and to query the system to gain proficiency and to achieve grant requirement deliverables.

Anador County Unit Berkeley MIC.
Butte County Unit Lyngo County Unit Counts Counts County County

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More about the Response Personnel Unit (RPU)

Todd Frandsen, Tactical EMS Technician / EMT Senior Emergency Services Coordinator, Terrorism Liaison Officer

Todd has an extensive background in Emergency Management, EMS, Tactical EMS, Fire/Rescue, Homeland Security and Terrorism Response. He has obtained the State Emergency Management Specialist Certification along with the FEMA Emergency Manager Certification. Before his time with EMSA, Todd served in the US Army as a Combat Engineer. Once honorably



Todd Frandsen

discharged, he then began his 25-year career as a first responder within Fire Service, Ocean Rescue, Ambulance, and lastly as the OES Region III Regional Disaster Medical Health Specialist before coming over to EMSA.

Todd has been with EMSA for the past four and a half years working in the Response Resource Unit. His responsibilities included managing the Cal-MAT deployable medical supplies, pharmaceuticals, bio-medical equipment, mobile medical structures, along with field disasters response and State exercises. He has most recently moved over to the Disaster Response Personnel Unit and continues to serve as the State Tactical EMS Coordinator, Terrorism Liaison Officer, EMSA Duty Officer, and Agency Representative for the State Operations Center and Medical Health Coordination Center.

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Online Disaster Training Opportunity

Emergency Management Institute



The Emergency Management Institute's (EMI) Distance Learning (DL) Section offers the Independent Study Program (ISP). This is a distance learning program which offers training, free of charge, to the nation's emergency management network and the general public. It serves as both an alternative means to deliver valuable training to the professional and volunteer emergency management community, and an opportunity to improve public awareness and promote disaster preparedness nationally. The Independent Study Program offers over 185 training courses via the training website. There has been substantial growth in the program since 2004 due to the National Incident Management System training requirements. To learn more about training classes and many other training opportunities, visit FEMA's Emergency Management Institute's website: http://www.training.fema.gov/EMI/

IS-368: Including People With Disabilities & Others With Access & Functional Needs in Disaster Operations

Link: https://training.fema.gov/is/courseoverview.aspx?code=IS-368

Course Overview

The purpose of this course is to increase awareness and understanding of the need for full inclusion of disaster survivors and FEMA staff who are people with disabilities, and people with access and functional needs. The course provides an overview of disabilities and access and functional needs and explains how disaster staff can apply inclusive practices in their disaster assignments.

Course Objectives:

At the completion of this course, participants should be able to:

- Explain the importance of including people with disabilities and others with access and functional needs in disaster operations at the JFO and field locations.
- Describe how JFO and field staff can support and include people with disabilities and others with access and functional needs in disaster operations.
- Describe principles and FEMA initiatives that provide a foundation for the integration of people with disabilities and others with access and functional needs in disaster operations.
- Describe the history of the treatment of and services for people with disabilities.
- Identify laws that provide the legal foundation for issues related to people with disabilities and others with access and functional needs.
- Describe the function of the Disability Integration Advisor.
- Describe personal actions to support the integration of people with disabilities and others with access and functional needs in the JFO and field disaster operations.

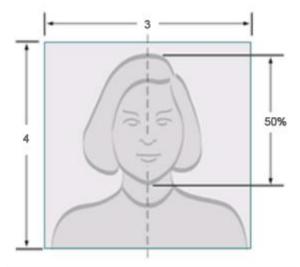
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DHV "User Tips"

DHV system allows system administrators to upload your photo into the system. Administrator can add a photo to a volunteer's profile by taking a new photo or uploading an existing photo of a volunteer. If your local administrator needs your photo, please send a photo according to the following guidelines:

DHV System Photo Guidelines

- Photos should be taken in full-face view with the responder directly facing the camera.
- The responder should have a neutral facial expression and both eyes open.
- Include headpieces if worn daily for religious purposes; however, they should not obscure or cast shadows on the eyes or any other part of the face.
- If the responder normally wears glasses (without tinted lenses), a hearing device, or similar articles, they may be worn in your photo.
- To avoid glare on glasses, slightly tilt them downward or turn off the camera flash.
- The colors should reproduce natural skin tones.
- Use a well-lit white or off-white background free of patterns, objects, or textures.
- Position the camera in front of the responder. Make sure the responder is facing the camera and has a neutral expression with eyes open.
- Set the lighting in a way that there are no shadows on the responder's face or background.
- Use a digital camera that allows you to set the aspect ratio of the photo to 3:4.
- The top of the head, including the hair, to the bottom of the chin should be about 50% of the image's total height as shown below.
- Save the digital image in the GIF or JPEG format. The image size should not exceed 600 KB.



If you have issues accessing your DHV account, please email to dhv@emsa.ca.gov.

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DHV is California's ESAR-VHP Program

The Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) is a federal program created to support states and territories in establishing standardized volunteer registration programs for disasters and public health and medical emergencies.

Disaster Healthcare Volunteers (DHV), California's ESAR-VHP program administered at the state level, verifies health professionals' identification and credentials so that

they can respond more quickly when disaster strikes. By registering through ESAR-VHP, volunteers' identities, licenses, credentials and accreditations are verified in advance, saving valuable time in emergency situations.

Why Do We Need ESAR-VHP?

In the wake of disasters and public health and medical emergencies, many of our nation's health professionals are eager and willing to volunteer their services. In these times of crisis; hospitals, clinics, and temporary shelters are dependent upon the services of health professional volunteers. However, on such short notice, taking advantage of volunteers' time and capabilities presents a major challenge to hospital, public health and emergency response officials. For example, immediately after the attacks on September 11, 2001, tens of thousands of people traveled to ground zero in New York City to volunteer and provide medical assistance. In most cases, authorities were unable to distinguish those who were qualified from those who were not - no matter how well intentioned.

There are significant problems associated with registering and verifying the credentials of health professional volunteers immediately following major disasters or emergencies. Specifically, hospitals and other facilities may be unable to verify basic licensing or credentialing information, including training, skills, competencies and employment. Further, the loss of telecommunications may prevent contact with sources that provide credential or privilege information. The goal of the ESAR-VHP program is to eliminate a number of the problems that arise when mobilizing health professional volunteers in an emergency response.

Disaster Healthcare Volunteers (DHV)

In accordance with federal mandate, California has developed the Disaster Healthcare Volunteers (DHV) Program to facilitate and

manage the registration, credentialing and deployment of volunteer healthcare professionals (VHPs) in California. DHV uses a software system for the management of volunteers, including the registration, notification, communication and credentialing needs associated with volunteer management. The DHV Program is the single source system operated and administered by local, regional and state, public health and emergency medical services agencies.

DHV is administered by all system stakeholders and managed by the California EMS Authority in partnership with the California Department of Public Health (CDPH). DHV volunteers include healthcare professionals (medical, public health, mental health, EMS and other personnel) who are willing to be called upon in the event of an emergency or disaster. DHV volunteers are pre-registered and pre-credentialed. Deployment of volunteers will follow Standardized Emergency Management System (SEMS) procedures.

To register on the DHV system or get more information, visit our website, www.healthcarevolunteers.ca.gov

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Have You Updated Your DHV Registration Information Lately?

We depend upon each of you to update your DHV profile with your correct information. It is important that you take a moment to update your DHV System information when your information changes. Have you moved? Do you have a new occupation or a new employer? Have your email or phone numbers changed?

Please take a moment to update your file. Just log into www.healthcarevolunteers.ca.gov and click on the "Profile" tab. From there you can navigate through your information. Click on "Edit Information" to make your changes and then be sure to click on "Save Changes" when you have completed your edits.

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The DHV Journal is Published and Distributed Via Email

News and information for participants in the Disaster Healthcare Volunteers Program administered by EMSA and operated by System Administrators in local communities and Medical Reserve Corps Coordinators throughout California. This Journal is published and distributed periodically to the partners of the DHV Program.



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